P. 06
RECEIVED
CENTRAL FAX CENTER
SEP 0 9 2004

fel

Attorney Docket No. 56,672 (70904)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| APPLICANTS   | K. Kitamura, et al.   | EXAMINER:            | Huber, Paul W.            |  |  |  |  |  |  |
|--|---|----------------------|---------------------------|--|--|--|--|--|--|
| U.S.S.N.:  | 10/041,068  | GROUP:               | 2653                      |  |  |  |  |  |  |
| FILED:   | November 1, 2001  | Conf. No.            | 5240                      |  |  |  |  |  |  |
| FOR:   | AN OPTICAL PICKUP FOR OPTICALLY READING/ WRITING DATA INCLUDING CONVERGENT AND ABERRATION CORRECTION OPTICAL SYSTEMS (As-Amended) |                      |                           |  |  |  |  |  |  |
| Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450   |   |                      |                           |  |  |  |  |  |  |
| CERTIFICATE OF FACSIMILE TRANSMISSION  I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to (703) 872-9314 at the U.S. Patent and Trademark Office on September 9, 2004. |   |                      |                           |  |  |  |  |  |  |
| By:  |   |                      |                           |  |  |  |  |  |  |
| RESPONSE TO OFFICE ACTION Sir:   |   |                      |                           |  |  |  |  |  |  |
| . The follow   | ving is in response to the Off  | fice Action mailed M | ay 28, 2004, in the above |  |  |  |  |  |  |
|  | etion :   |                      |                           |  |  |  |  |  |  |

10/26/2004 RGRADEN - 00000001 041105 10041068

.01 FC:1251

110. M petition has also been filed herewith requesting a one (1) month extension of time to September 28, 2004, to respond to the above referenced Office Action. Applicants also conditionally petition for a further extension time to provide for the possibility that such a petition is required. As indicated below, please charge Deposit Account No. 04-1105 for the required fee.

PAGE 6/17 \* RCVD AT 9/9/2004 9:50:05 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-1/2 \* DNIS:8729314 \* CSID:817 439 4170 \* DURATION (mm-ss):03-64

copy

101041,068

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10/041068

| CLAIMS AS FILED - PART I<br>(Column 1)  |  |   | (Column 2)      |                       |                               | SMALL ENTITY TYPE |           | OR                   | OTHER THAN SMALL ENTITY |           |                     |                        |
|---|--|---|-----------------|-----------------------|-------------------------------|-------------------|-----------|----------------------|-------------------------|-----------|---------------------|------------------------|
| TOTAL CLAIMS  |  | 19  |                 |                       |                               | ſ                 | RATE      | FEE                  |                         | RATE      | FEE                 |                        |
| FOR   |  | NUMBER FILED                              |                 | NUMBER EXTRA          |                               |                   | BASIC FEE | 370.00               | OR                      | BASIC FEE | 740.00              |                        |
| TOTAL CHARGEABLE CLAIMS   |  | . 19 minus 20=                            |                 | • 10                  |                               |                   | X\$ 9=    |                      | OR                      | X\$18=    |                     |                        |
| INDEPENDENT CLAIMS  |  |   | 1 minus 3 =     |                       | * \$                          |                   |           | X42=                 |                         | OR        | X84=                |                        |
| MULTIPLE DEPENDENT CLAIM PF   |  |   | RESENT          |                       |                               |                   |           | +140=                |                         | OR        | +280=               |                        |
| * If the difference in column 1 is  |  |   | less than ze    | ero, ente             | r "0" in c                    | olumn 2           | . !       | TOTAL                |                         | OR        | TOTAL               | 7402                   |
| CLAIMS AS AMEN  |  |   |                 |                       |                               | (0.1              |           | SMALL E              | ENTITY                  | OR        | OTHER<br>SMALL      | THAN                   |
| 220   |  | (Column 1)                                |                 | (Colu                 |                               | (Column 3)        | 1 1       | SMALL                |                         |           | SHIALL              |                        |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |                 | NUM<br>PREVIO<br>PAID | BER<br>OUSLY                  | PRESENT<br>EXTRA  |           | RATE                 | ADDI-<br>TIONAL<br>FEE  |           | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 19                                      | Minus           | ** 6                  | 70                            |                   |           | X\$ 9=               |                         | OR        | X\$18 <b>=</b> ∖    |                        |
|   | Independent                                    | . 7                                       | Minus           | ***                   | 3                             | =                 |           | X42=                 |                         | OR        | X84=                |                        |
|   | FIRST PRESE                                    | NTATION OF MU                             | JETIPLE DE      | PENDEN                | T ÇLAIM                       |                   | 1         | +140=.               | ٠                       | OR        | +280=               |                        |
|   |  |   |                 |                       |                               |                   |           | TOTAL                |                         | OR        | TOTAL<br>ADDIT, FEE |                        |
|   |  | (Column 1)                                |                 | (Colu                 | mn 2)                         | (Column 3)        |           | <b>D</b> DII. 1 LE [ |                         |           |                     |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING                       |                 | HIGH                  | HEST<br>BER                   | PRESENT           | 1 Γ       |                      | ADDI-                   |           |                     | ADDI-                  |
|   |  | AFTER AMENDMENT                           |                 |                       | OUSLY                         | EXTRA             |           | RATE                 | TIONAL<br>FEE           |           | RATE                | TIONAL<br>FEE          |
| NDW   | Total  | *   | Minus           | **                    |                               | =                 |           | X\$ 9=               |                         | OR        | X\$18=              |                        |
| AME   | Independent                                    | *   | Minus           | ***                   | - 0: 4:44                     | -                 | 4 [       | X42=                 |                         | OR        | X84=                |                        |
|   | FIRST PRESE                                    | NTATION OF MI                             | ULTIPLE DE      | PENDEN                | CLAIM                         |                   | ┚┃        | +140=                |                         | OR        | +280=               |                        |
|   |  |   |                 |                       |                               |                   | ,         | TOTAL<br>ADDIT, FEE  |                         | OR        | TOTAL<br>ADDIT, FEE |                        |
|   |  | (Column 1)                                |                 |                       | mn 2)                         | (Column 3)        |           |                      |                         |           |                     |                        |
| AMENDMENT C   |  | CLAIMS<br>RÉMÀINING<br>AFTER<br>AMENDMENT |                 | NUA<br>PREVI          | HEST<br>ABER<br>IOUSLY<br>FOR | PRESENT<br>EXTRA  |           | RATE                 | ADDI-<br>TIONAL<br>FEE  |           | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus           | **                    |                               | =                 |           | X\$ 9=               |                         | OR        | X\$18=              |                        |
|   | Independent                                    | *   | Minus           | anta.                 |                               | =                 |           | X42=                 |                         | OR        | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                 |                       |                               |                   | 440       |                      |                         | .000      |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                 |                       |                               |                   |           |                      |                         |           |                     |                        |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE OR HIGHEST Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                 |                       |                               |                   |           |                      |                         |           |                     |                        |
|   | The "Highest Nur                               | nber Previously Pa                        | uid For" (Total | or Indepen            | dent) is th                   | e highest numb    | er fou    | ınd in the ap        | propriate bo            | x in co   | iumn 1.             |                        |